## INTERNATIONAL RESCUE COMMITTEE



#### PAKISTAN PROGRAM



ANNUAL REPORT

2004

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Saleema and her son coming back from one of Primary Health Care's Basic Health Units





Fatima reading out her lesson at one of Female Education Program's Schools.



#### From the Country Director



#### **Dear Friends**

I am honored to share this annual report that overviews the IRC Pakistan's teamwork and dedication.

Despite Pakistan's challenging political situation, and last year's budget constraints, our program successfully shouldered a transition that translated into emphasis on activities that support refugee repatriation and advance durable solutions. Our efforts harmonized with the UNHCR's policy of camp consolidation and group return that resulted in the return of over 380,000 refugees. The IRC was successful and productive because we continually exerted and readjusted our program portfolio to the changing work environment and priorities. New activities were developed, some were expanded while few others were reduced and eventually phased out. A Durable Solutions Project was launched in July 2004 to promote economic opportunities for marginalized urban refugees and their host communities. Through apprenticeship and IRC's own skills development centers, the Durable Solutions Program provided vocational skills in tailoring, embroidery, lacework, auto mechanics. carpentry, welding and computer hardware to extremely vulnerable individuals. With a skill, this group can improve their living conditions and are less hesitant to repatriate. The project adopts a case-worker approach that works directly with families to ensure that they have adequate and correct information regarding potential return and resources when they return.

The Female Education Program continued to provide access to 15,000 primary and secondary school students of whom 65% are girls. It has provided teacher training to hundreds of teachers, who will contribute to the reconstruction of Afghanistan. FEP works closely with the Ministry

of Education in Afghanistan to assist teachers and students who decide to repatriate.

The Health program achieved greater heights in controlling transmissible diseases, namely, diarrhea, malaria and leishmania and put larger emphasis on immunization of women and children. The reproductive health and water and sanitation components of the Health Program continued to play an exemplary role in fostering harmony and coexistence between the refugees and their host communities through their services that target both communities in the Hangu Thal area.

The Protection Program achieved 90% of it's objectives in training IRC and other NGO staff in protection and human right issues. Through reviewing of project proposals and monitoring, the program ensures that refugees are respected and the "do no harm" principle is enforced.

Apart from providing psychosocial services for women and day care for children, the Women's Empowerment Project worked integrally with the Durable Solutions and Protection programs to identify extremely vulnerable families that can be referred for assistance or repatriation.

In 2005, the IRC Pakistan will work to support the refugee's voluntary repatriation while working in collaboration with the Pakistan government and UNHCR to develop comprehensive solutions for those who might remain after the end of the tripartite agreement in March 2006. The IRC in Pakistan would not be able to provide lifesaving and vital services to refugees without the cooperation of the government of Pakistan and the support of our donors and partners particularly UNHCR, ECHO, RET, SV, CIDA, BPRM, WFP, J&J, and EC. We are also thankful to our staff and the refugees whose courage and determination inspires all of us.

Mustafa A. M. Elkanzi Country Director IRC Pakistan Program

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# INTERNATIONAL RESCUE COMMITTEE

#### About the IRC

The international rescue committee was founded at the request of Albert Einstein to assist victims of Hitler's policies. In 1933 IRC has provided hope and humanitarian aid to refugees and other victims of oppression and violent conflict around the world. At the outbreak of an emergency, we provide sanctuary and lifesaving assistance-rapidly delivering critical medical and public health services, shelter and food. Once a crisis stabilizes, we set up programs to enable refugees to cope with life in exile. Through training, education and in-come generating programs, we help refugees acquire new skills to become self-sufficient. The IRC is a global organization in every respect, and our staff comprises citizens of 40 countries. Institutional, government and individual donors from around the world support our work.



Founded in 1933, the international rescue committee is a leading nonsectarian, voluntary organization providing relief, protection and resettlement services for refugees and victims of oppression or violent conflict. The IRC is committed to freedom, human dignity and self-reliance. This commitment is reflected in well-planned global emergency relief, rehabilitation services and advocacy for refugees.



#### Where We Work

We serve refugees and displaced people in Afghanistan, Albania, Azerbaijan, Belgium, Bosnia and Herzegovina, Burundi, Chad, Chechnya/Ingushetia, Colombia, Democratic Republic of Congo. Croatia, East Timor, Ethiopia, Russia, Georgia, Guinea, Indonesia, Iraq, Kenya, Kosovo, Liberia, Macedonia, Pakistan, Rwanda, Serbia, Sierra Leone, Somaliland, Spain, Sudan, Switzerland, Tanzania, Thailand, Uganda, United Kingdom and United States.



#### **About IRC in Pakistan**

The IRC began assisting Afghans 24 years ago when the soviet invasion resulted in a mass influx of refugees. Stretching from Baluchistan to North West Frontier Province (NWFP) the IRC provides assistance and works through implementing partner NGO's to help thousands of Afghan refugees. In 1999, a severe drought in Afghanistan prompted more refugees to stream into Pakistan in search of food and water. The IRC launched new emergency programs in camps and settlements to meet the life saving needs of the uprooted. The U.S. and Allied Forces military campaign in Afghanistan following September 11, 2001 sent a new wave of refugees to Pakistan, bringing 65,000 more under IRC's direct care. The IRC provided emergency assistance to the newly arrived refugees accommodated in the new and old camps in NWFP.

The tripartite agreement signed between UNHCR and the governments of Afghanistan and Pakistan envisions the repatriation of all Afghan refugees to Afghanistan by the end of March 2006. UNHCR'S voluntary repatriation program has helped about 1.9 million Afghans to go home from Pakistan in the past two years. The IRC supports UNHCR'S efforts in facilitating the process and continues to supply humanitarian assistance to those who remain in Pakistan.



#### **Our Vision in Pakistan**

IRC seeks to provide well-planned assistance and protection to the Afghan refugees. We work towards building capacity of refugees to improve their lives in Pakistan and to ensure seamless repatriation and reintegration into Afghanistan. IRC aims to explore ways & means to provide assistance to the local communities affected by the presence of the refugee population.

# Including the Excluded

In contrast to various assistance programs for Pakistan's camp based population, Afghan refugees living in the urban areas of Pakistan have been historically ignored. With limited support and assistance and no protection network, many of these refugees have struggled to make it on their own.

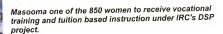
Funded by ECHO, the Durable Solutions Project (DSP) started operations in Peshawar in July 2004. The Project seeks to enable 1,500 vulnerable individuals and their families in the urban areas of Peshawar to move towards self reliance by providing them access to income-generating opportunities and human rights protection mechanisms. The project aims to assist the Afghan beneficiaries (80%) by moving them towards one of United Nations High Commission for Refugees (UNHCR) identified durable solutions; repatriation, local integration or third country resettlement. At the same time, the local Pakistani beneficiaries (20%) will also benefit from the multi-dimensional Program.

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The identification of 1500 project beneficiaries is done through comprehensive intake interviews that focus on the vulnerability and safety of the entire family, their livelihood and future plans. The EVI criteria include female headed households, the physically and mentally disabled, those with chronic medical conditions and protection concerns, the elderly and the very poor.

Based in ten urban settlements around Peshawar, the Project has established ten Skill Development Centres (SDCs) in the urban areas of Peshawar where 850 women are provided skills such as tailoring, embroidery and lacework in a secure and comfortable environment. At the same time, the SDCs act as a meeting place for these women where they come together to learn and share experiences. They also receive basic literacy and health education at the SDCs.

DSP also provides non-skill assistance through medical and protection referrals. 150 chronically ill beneficiaries are referred to local health facilities for medical treatment and rehabilitation.



The Apprenticeship program places 250 male beneficiaries at resource centers and workshops for training in auto mechanics, carpentry, tailoring and embroidery, welding and computer hardware. The External Placement component of the DSP trains 250 male and female beneficiaries in tuition based courses such as computers. English language, driving and Traditional Birth Attendant (TBA) classes. All DSP beneficiaries who graduate from the training courses receive certificates of completion and tool kits, motivating them to start their own work.

The Protection component conducts repatriation information sessions to educate Afghan beneficiaries and their communities about UNHCR's assisted voluntary repatriation program. These sessions provide information about the various facilities and services present in Afghanistan, and helps refugees overcome their apprehensions to repatriate, whilst at the same time acquainting them with the various facilities and services present in their country of origin. The information sessions also provide an excellent opportunity for beneficiaries to share their concerns about returning. These concerns are documented and those related to property disputes are shared with the Norwegian Refugee Council (NRC) for possible interventions. Any protection related cases are forwarded to UNHCR or local organizations for support.



Male beneficiaries are imparted marketable skills in the Apprenticeship Program

It is anticipated that a substantial number of Afghan refugees will remain in Pakistan therefore voluntary repatriation is the preferred durable solution for these refugees. As the end of the Tripartite Agreement draws closer, the DSP will highlight the situation of Afghans not ready to repatriate through ten community profiles and three Topical Reports which will be shared with UNHCR for planning purposes.

The DSP interventions for vulnerability reduction will continue to move the extremely vulnerable towards self-reliance and give them the confidence to build their lives towards a stable and prosperous future.



Female refugees participating in a TBA session at DSP's External Placement Program

#### **Everyone Matters**

In the midst of its hard earned success, when the WEP was at the peak of accomplishing its goals, activities had to be prematurely stopped due to the cessation of assistance in the new refugee camps of North West Frontier Province and Balochistan. The new camps in which WEP was actively involved were Shalman, Kotki, New Shamshatoo and Bassu Camps.

The joint decision by the United Nations High Commissioner for Refugees (UNHCR) and the Government of Pakistan on the closure of the new camps, resulted in the abrupt end of project activities and voluntary relocation of refugees to old camps and urban settlements, thus giving an opportunity to WEP to spread its wings to the said areas, where the load was further increased on the present dwindling assistance and services provided.



By attending literacy training of WEP, many young female refugees are able to gain basic educational skills

This project aims to improve the plight of Afghan women and children's mental and physical health through psychosocial counseling sessions that are focused on issues such as depression, anxiety, child and spouse abuse and harassment. Closely linked with these concerns and of key importance to women are Reproductive Health care issues, hence, RH also stemmed as a primary objective of the project.

Through the WEP, the psycho-social, health related, adult literacy and vocational needs of the beneficiaries are addressed. In the centers, women are able to communicate with psychosocial and health professionals about matters that are generally not dealt with openly, The reason being that these issues are strictly 'women issues' or because of certain social and cultural limitations.



Female counseling sessions being held amid the refugees and the psycho-social counselors



Children at one of WEP's Day Care Centers

The Women Empowerment Program also focused on various other fronts apart from just female counseling. Literacy and vocational training, being a marketable skill, is an integral part of the fundamental activities of the WEP. and it serves as a good rallying point for women to participate in the centers, and at the same time it compliments the overall empowerment activities. Furthermore, Day Care Centers have been established to cater to the needs of the children accompanying the beneficiaries. This has proved very beneficial and has been highly appreciated by the ladies as they are able to participate in all activities. without having to worry about their young ones.

WEP continued its proven efforts and interventions of empowering women along a similar blueprint of activities in 10 urban settlements and camps of Peshawar, where previously established centers of the Durable Solutions Project (DSP) exist.

Despite its twists and turns, WEP has witnessed a desirable change in the attitude and behavior of the targeted Afghan women. Success stories within the Centers and community are a testimony to the fruitful nature of its activities and hard-work.



A blind refugee in one of the camp-based WEP centers



# **Quenching Refugee Needs**

Clean water and sanitary living conditions have crucial implications on the human health and well being of any country. The number of people in the developing countries, including Pakistan, without access to clean water and adequate sanitation continues to grow, as additional provisions fail to keep up with local population growth coupled with the huge refugee influx from Afghanistan. For the past two decades, IRC-Water and Sanitation(WATSAN) has been responsible for providing water and sanitation services to approximately 400,000 Afghan refugees residing in 68 refugee settlements throughout the North West Frontier Province of Pakistan (NWFP). IRC, through its 15-20 years of extensive work has not only attained a level of excellence in the water & sanitation sector amongst the Afghan refugees but has also gained knowledge about the water & sanitation needs of the host population.

Drilling boreholes is one of the major program activities concerned with providing clean drinking water. Drilling operations are carried out in the areas where there is no usable surface water, the water table is too low and the subsurface soil is hard or un-suitable for construction of shallow wells. During 2004, the program was able to drill 40 boreholes in districts Kohat & Hangu and Kurram Agency. Each of these boreholes has the capacity to support the water needs of 500 people.





IRC constructed hand pump, providing clean drinking water for the refugee community in Kohat & Hangu Agency

IRC workers hard at work drilling a Borehole for the refugees

One of the principal objectives of the WATSAN program is to identify and minimize the risks associated with sources of water borne diseases for initiation of prompt corrective measures before the occurrence of public health problems. The program conducted regular physical, chemical and biological analysis of 120 water sources in the working area and a two monthly chlorination of water sources in the entire working areas was undertaken to avoid water contamination. IRC also conducted trainings of local communities, staff of local BHUs and members of water management committees on chlorination. IRC bases its work on the WHO publicized standards for water quality.



An IRC-WATSAN worker testing a water sample from the Kohat and Khurram Agency's for water borne diseases



Construction of a Gravity Spring

IRC works closely with the local community to develop and improve the shallow wells. The IRC-WATSAN team assigned to shallow wells engages in a thorough dialogue with the community to ensure the beneficiaries participation in planning and taking ownership from the beginning besides just providing the labor support. IRC focuses mainly on that part of the activity which involves technical assistance such as designing, lining, covering, sealing, construction of aprons and installation of hand pumps or reel axles.

Gravity springs being the safest and purist natural source of drinking water are paid special attention by WATSAN. Through detailed surveys of the working area; potential springs for possible protection and improvement are identified. The technical team responsible for springs then develops and protects the selected sources through designing and extending gravity fed supply systems, construction of collection chambers and putting up cistern tanks and tap stands in the places that are accessible to beneficiaries especially women. In 2004 a total of 8 gravity springs were developed.



Community involvement in improving Shallow Wells.

## Saving Lives

The Primary Health Care Program of the International Rescue Committee (IRC) in Hungu is providing life saving health care services for pregnant women. The Basic Health Unit (BHU) often provides simple treatments that often determine the difference between life and death.

Marzia, a pregnant patient of the Mother and child Health center (MCH) of Lakhti Banda BHU, is one such case where a simple diagnosis of diabetes not only saved the life of the mother but also of the newborn child.

Marzia had a history of difficult pregnancies which resulted in three previous stillbirths and six miscarriages. This had taken a great toll on Marzia physically and emotionally. She had become very weak and suffered from various ailments due to the miscarriages and still births.

Emotionally she was depressed by the fact that she had been unable to successfully give birth to a healthy child. A mother forms a bond with the child she is carrying, and Marzia too had been deeply affected by the children she had been carrying for months but was never able to hold in her hands.

Although she had gone to doctors before, no specific reason or symptom was identified for the unsuccessful deliveries. Upon arrival to the MCH she was examined by a lady doctor of the BHU and tests were undertaken. It was discovered that she was suffering from diabetes. She was registered in the BHU and was treated for her diabetes. During her pregnancy she was closely followed and check ups were done to assure that her sugar levels were maintained at a normal level.

As result Marzia safely gave birth to a healthy baby and is jubilant to be able to finally hold a child she had been carrying for nine months. After years of unsuccessful attempts to deliver a child, she is finally experiencing the joy of motherhood. She greatly appreciated the extra efforts that IRC's PHC staff took to diagnose her condition, saving her life and her child's.



# From Refuge to Relief

The year was 1979. The Former Soviet Union had started their invasion of Afghanistan and thousands had crossed the border into Pakistan for refuge. Among them, was a one-month old boy named Amaan Gul. He and his family fled from the Afghan province of Logar and like many other families, came to settle in Pakistan to start a new life.

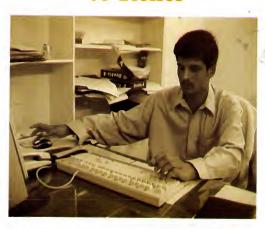
When the family arrived in Pakistan, they took refuge in the Kaykando camp near the Hangu area of NWFP. After a month, Amaan's father, Allah Mohammad became employed as a daily laborer and they moved to the urban area of Tehkal. Soon his sons were old enough to work as well. Amaan started to work at a nearby sugar mill and was paid a meager wage that contributed to the family's negligible income.

Fittingly, Amaan translated into English means "refuge or protection". He along with his family and many others have been seeking refuge in Pakistan for many years.

23 years later Amaan along with his family, is taking the brave step of going back to his homeland, a country which after many years of war and destruction finally seems to be at peace.

IRC's Durable Solution Project identified Amaan's father as an extremely vulnerable individual due to the family's poor economic conditions which were exacerbated by costly medication to fight Amaan's illness. As a result Amaan was enrolled in the Apprenticeship program. As an apprentice in a computer hardware shop he completed a 3-month course and obtained marketable skills in computer hardware engineering. With his own initiative he picked up software skills which will help him get a job when he returns to Afghanistan.

Receiving this essential information and with the security situation in Afghanistan gradually improving, Amaan's family felt that now was the right time to go back. When asked about shelter and employment prospects, Amaan confidently replies that they will rent shelter in their native village in the province of Logar and equipped with valuable computer skills and knowledge, he plans to seek employment in an NGO in Afghanistan.



The DSP project not only provides skills to urban settled refugees but also holds repatriation information sessions educating individuals about UNHCR repatriation procedure and facilities available in Afghanistan. With the help of visual aids and constructive question and answer activities, many of the participants are able to gain and share up to date knowledge about the development of infrastructure, educational and health facilities, and prospective employment opportunities in Afghanistan. Amaan Gul attended one such repatriation information session, and went back with valuable information he shared with his family.

Amaan's father, Allah Mohammad explains to IRC staff that he is working as a daily laborer in Pakistan, earning wages that he can similarly earn in his homeland and feels that it is time to go back. He patriotically proclaims that Afghanistan is a prosperous country rich with natural resources but needs people like himself and his sons to go back and use their skills for the development of their country. He adds that he and his family are grateful to the IRC for its skill training and the Pakistan government and its people for their hospitality, for without their support and assistance their return would not have been possible.

#### **Treating the Ones in Need**

IRC began its health program in 1980 with two mobile medical teams in the Hangu district of NWFP. This program expanded into a comprehensive primary health care program, through which both curative and preventative health care services are provided to the population. In 2004, the program was operating 9 Basic Health Units (BHU's) including laboratories, two Basic Emergency Obstetric Care (EmOC) facilities, and a dental clinic for the 106,000 Afghan refugees living in the 12 camps of the Hangu districts.

In 2004 diagnosis and treatment of common diseases such as acute respiratory tract infections, diarrheal diseases and gastric problems, malaria, leishmaniasis, TB, gynaecological disorder, chronic conditions (hypertension, chronic chest problems, cardio-vascular problems including hypertension, diabetes, epilepsy and some psychiatric problems), and musculo-skeletal problems were the main focus points of Primary Health Care, 179, 826 patients visited the BHU's this year. BHU's are equipped with laboratory facilities, and a total of 43,463 tests were performed in nine laboratories in 2004.

A referral system was in place for both, the BHU's and EmOC, facilitating them to assist those cases that needed treatment in tertiary medical services. Ambulance services are available for emergency cases, where as scheduled shuttle services are available for the transportation of cold referral cases to the hospitals in Peshawar.

Immunization to children under-five and women from the ages of 15-49 is also administered. A total of 4,102 children under the age of one year were given six vaccines, which brings the fully immunization rate to 96%. 82% of pregnant women received complete immunization against tetanus. The improved immunization coverage and nutritional status of children resulted in a decrease of child mortality in this population.

A Total of 6,987 bed-nets were distributed to the refugees in the 12 camps. These bed-nets were impregnated with insecticides. The use of bed-nets was found effective in protecting the refugees on an individual basis and a decrease in the incidence of malaria in the area was also noted.

Birth control counseling is provided regularly through the BHUs and now there is an improvement in the knowledge of women and men regarding the benefits of having a break in between births and on the use of birth control methods.



A doctor examining a patient

Health education is offered regularly to the refugees in the BHUs, schools and camps. Female and male volunteer health workers were also provided training. A total of 432 female and 411 male volunteers were given refresher training and they themselves extensively participated in the community awareness programs. The health education program proved very effective in increasing the utilization of facilities by the beneficiaries and improving their knowledge and practices.



Female refugees attending a health training session.

The refugee community has been actively involved in the program planning and implementation of PHC's activities. Health committees exist in all the camps and they regularly meet with the BHU staff on various health issues and present their inputs for the purpose of improving the program. The community involvement in the IRC health program is one of the main reasons for the notable achievements of this program. The community values the IRC health services and provides regular feedback to the program staff on the services that they have received from the BHUs and EmOC facilities.

The total mortality in 2004 was 3.12 per thousand population. This includes all the deaths which occurred in the 12 camps of 106,000 individuals. The death rate is much lower than many of the developed countries and significantly lower than Afghanistan.

The two EmOC facilities of IRC provided quality based services to manage deliveries, obstetric complications and management of abortion complications. A total of 4,424 deliveries were managed in the EmOC facilities. About 45% of the total deliveries in the EmOC facilities were from the local communities, as women in the local community have limited access to the government services. Also the quality of the EmOC services in the IRC facility is quite high as compared to the government health facilities.

Children are quite a significant portion of IRC's total beneficiaries. As far as PHC is concerned, it caters to numerous health problems associated specifically with children. Growth monitoring, nutrition education and oral re-hydration therapy to children were provided regularly in the Mother and Child Health (MCH) centers of the BHUs. A total of 42.772 children were screened for their growth progress and amongst them only 162 children were below the normal growth curve. The malnutrition rate is below 3% and there has been a significant improvement in the nutritional status of children



A health worker weighing a child

## Making it Work till the End

Despite voluntary repatriation efforts which began in 2002, millions of Afghans are still living as refugees in Pakistan where educational opportunities for Afghan refugees remain extremely limited.

Through implementing effective and relevant educational services in target locations, IRC has been improving the quality of life for conflict-affected Afghan refugees, especially girls and women living in Pakistan. IRC has enabled these children and their teachers to serve as future leaders, teachers and professionals after their return to Afghanistan.

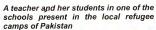
Regardless of funding cuts, in 2004 FEP has provided access to education to approximately 15,000 students in NWFP and Baluchistan, of which 65 percent are girls. Nearly 600 Afghan and Pakistani teachers (64 % females) are employed by IRC for assisting the students in the class.



A female student in one of FEP's schools, situated in the local camps of Peshawar

FEP maintains close contacts with the Ministry of Education through their links with the Afghan Consulate in Peshawar and within Afghanistan. This enables repatriating teachers and students to reenter the educational system easily when they return to Afghanistan.

The Female Education Program has published training manuals which continue to generate enormous enthusiasm. These manuals are given to various NGO's of Pakistan and some were sent to the teachers present in Afghanistan.





A 22 day Pedagogy psychosocial training was held from the 1st till the 22nd of July, 2004 in which 24 female refugees participated. This training will be an asset which will assist them in teaching whether they are present in Afghanistan or Pakistan.



A young female participant of the pedagogy training seminar

FEP supports limited post-secondary opportunities. Presently, IRC provides scholarships for 15 high school graduates in a one-year information technology course at a Pakistani private university. Shortly after completing this course, graduates found jobs at the World Bank in Afghanistan, the Ministry of Foreign Affairs and others were hired as staff at an international non-governmental organization, where they are putting their skills to work. In addition, FEP has placed an additional 55 graduates in various courses including physiotherapy and nursing.

In 2004, FEP developed Art Activities for Children, English Language, Social Sciences, Dari Grammar and has prepared a Dari language version of the Psychosocial training manual, copies of which are frequently requested from other organizations.

This program has rendered its services pertaining to effective and relevant educational services, in a total of 24 schools. IRC also provided stationery and relevant material for the students of these schools



Enthusiastic young refugee girls and boys participated whole heartedly in the Art Activities developed by FEP.



# The Right to a Dignified Life for all

Protecting vulnerable individuals, who have been victimized by conflict, must be a priority in any refugee crisis. Any relief provided should be based on the "Do No Harm" principle; meaning all activities are free of any abuse and exploitation. This concept is the driving force behind the establishment of IRC's Protection Unit.

Any humanitarian aid agency working to improve condition of refugees is well positioned to protect and promote human rights, and the Protection Unit seeks to do both.

The Protection Unit is the only cross-border program between Pakistan and Afghanistan. In both countries, it seeks to mainstream human rights and protection principles in to the design and implementation of all program activities of IRC programs. This is done by staff trainings, input provided at the time of program designing, ongoing evaluation of activities from protection perspectives, and providing feedback to program managers of this evaluation.

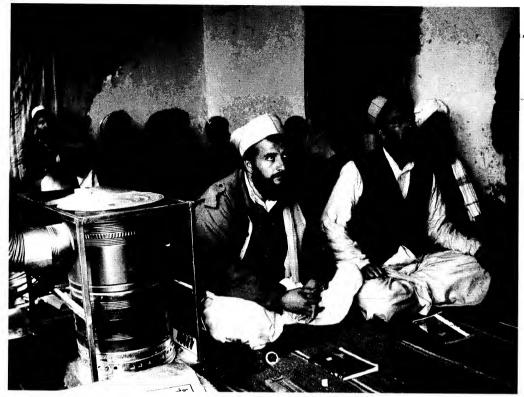
The training element has been extended to external organizations as well and efforts were made to identify and train an increased number of local NGOs that implement projects geared specifically toward protection and promotion of human rights. A total of 11 NGO's and 64 NGO staff members gained valuable information from the IRC Protection Unit.

As an outcome of this increased awareness, the Protection Unit often gets referrals of protection cases. These are followed up with relevant organization to ensure proper assistance is made available to the ones who need it.



Many refugee families are victims of human rights violation.

The Protection Unit successfully achieved its target of conducting training sessions for the IRC staff in protection techniques and laws associated exclusively to human rights, which are applicable to humanitarian work and refugee situations. The Protection Unit regularly interacts with staff from other IRC programs as a part of their monitoring and on-the-job training function. It brings protection and human rights violations to the attention of the various IRC programs which adapt their work and regularly incorporate protection concerns into the workings of the IRC staff.



Awareness raising session being conducted by IRC

Assessing the protection environment of the refugee camps where IRC operates is also a main concern. Different social survey techniques have been used to gather information and identify protection concerns relevant to the refugees. In Pakistan, over 50 camps have been visited by the Protection Unit in this regard. Monitoring has also been carried out by the Protection Unit in Afghanistan in the IDP camp in Jalalabad.

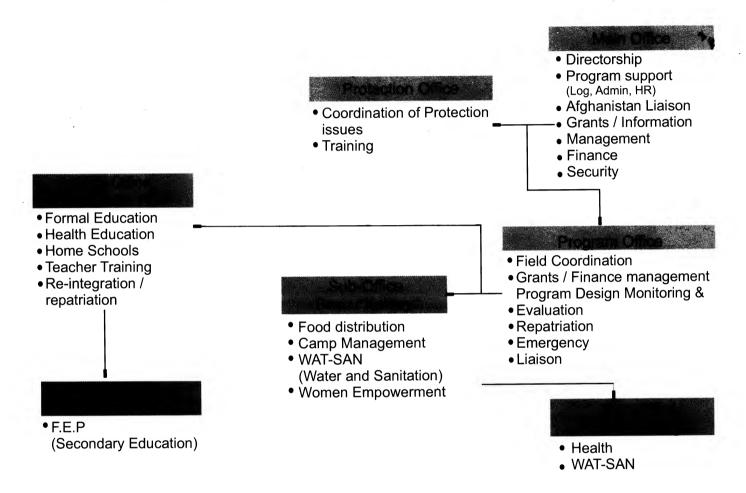
This information has then been shared with UNHCR and other concerned agencies to seek solutions for various issues identified during the assessments. The Protection Unit in Afghanistan has been involved in Returnee Monitoring during the year 2003-04 in the northern, central and eastern regions of the country. This was essentially an activity mandated to provide UNHCR with relevant information from the field to inform policy formulation.

More recently, the Protection Unit has achieved great success in the implementation of IRC's Mandatory Reporting Policies. It acted as a coordinating body between all IRC programs as well as support units to help set up practical mechanisms for the implementation procedures. This involved making the policy known and understood by all staff and beneficiaries, selection of focal points from all programs which would be advocated for and will help implement the policy keeping in view the specific requirements of the programs and setting up mechanisms to empower beneficiaries to raise their concerns. A number of trainings were also arranged in this regard on the policy.

# Respect, Renewal

# **Human Resources**

IRC Pakistan Organogram



The IRC HR Department is committed to providing an efficient staff management and development service. HRD is responsible for implementing processes for the recruitment, selection, and employment of local staff, administering staff benefits, monitoring staff performance, facilitating close of service, assisting with aspects of staff training and development, and promoting team work.

During the period under report, the HR Department facilitated employment of the best persons for various programs. In addition, 28 local internees were also employed in order to provide them with valuable exposure to a professional work environment and meet the requirement of their degrees.

One of the main achievements of the IRC HRD has been to facilitate qualified Afghan staff who wish to return to Afghanistan. In this regard both HRD Afghanistan and Pakistan closely coordinated on various modalities and provided internal training to more than 500 IRC school teachers thus enhancing their professional skills. IRC envisages that in the future this training will assist in the development of the education system in Afghanistan.

Due to the excellent performance of the IRC Pakistan staff, 4 permanent staff members secured international positions in various countries. IRC Pakistan also contributed to the emergency relief programmes in Indonesia and Kenya by assigning 3 staff member to carry out emergency relief activities.

Female refugees at a IRC's counseling session

#### **Picture Interest!**



Refugee men attending an educational Class at one of Peshawar's local camps



After the closure of the 'new' camps', refugees repatriated on a large scale, some back to the old camps while others opted to return to Afghanistan



Men and women both are given an equal opportunity for acquiring skills that can be a source of income in Pakistan as well as Afghanistan



Young girls attending a class at one of IRC's Schools. Many such schools are present in the camps of Peshawar.

## **IRC Donors** & Expenditure

The IRC Pakistan program is grateful for the donors' support without which our work would not be possible. Generous funding from several donors enabled IRC to provide a variety of vital programs and assistance to Afghans in 2004. They are:

- U.S. Department of State, Bureau of Population, Refugees and Migration (BPRM)
- United Nations High Commission for Refugees (UNHCR)
- World Food Program (WFP)
- United Nations Population Fund (UNFPA)
- United Nations Children's Fund (UNICEF)
- Stichting Vluchteling (SV)
- Refugee Education Trust (RET)
- Canadian International Development Agency (CIDA)
- Centers for Disease Control (CDC)
- Women's Commission (WC)
- European Commission (EC)
- Johnson & Johnson (J&J)
- The Macarthur Foundation and others

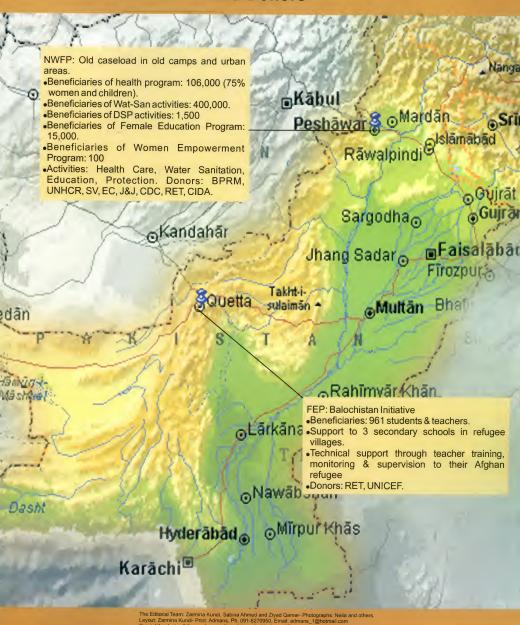
Women Empowerment Program	1%
Durable Solutions Project	1%
Protection Unit	2%
Water and Sanitation	9%
Primary Health Care	21%
Operational Costs	31%
Female Education Program	35%







# IRC Pakistan Program Activities, Beneficiaries, Location And Donors



#### The International Rescue Committee



Pakistan Program



International Rescue Committee
Pakistan Program
80-E Old Bara Road, University Town.
Peshawar, NWFP. Pakistan

International Rescue Committee 122 East 42nd Street New York, NY 10168-1289 USA